POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	69007 59	9/30/99 /06
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	EH	60135	28/18/95 4/18/00

INDEX OF CLAIMS

✔	Rejected	N		Non-elected
=	Allowed	I		Interference
−	(Through numeral) Canceled	A		Appeal
÷	Restricted	O		Objected

Claim		Date								
Final	Original	9/28	4/22	9/23	11/11 02/09					
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If more than 150 claims or 10 actions
staple additional sheet here

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